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ORIGINAL COMMUNICATIONS.

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HEMORRHAGE AFTER THE EXTRACTON OF TEETH.

BY JOHN FEARN, M. D., OAKLAND, CAL.

A WELL-KNOWN author says: "The dread of hemorrhage is instinctive in man." The sight of flowing blood has completely unnerved many a one, who in other respects has justly enjoyed a reputation for bravery and firmness. The good Book tells us "The life of all flesh is the blood thereof," and from that time through the ages, men, as they have looked upon blood flowing from the body, have seemed to realize that life was leaving that body, and this especially as it applies to the *human body*. Men may shed the blood of brutes with impunity, and yet be very unpleasantly affected at the sight of human blood. I remember an accident that occurred in my boyhood. The man was losing blood at a terrible rate; the surgeon needed some one to steady the mangled limb, and an intelligent butcher was chosen, but he soon began to faint, and retired. There is a class of pessimists who are never tired of speaking of the degeneracy of the race; who would have us believe that these *Hæmaphobists* are the fruit only of these degenerate days. But Dunglison tells us that these men are not peculiar to this day. But of old they who were afraid of the sight of blood were called *hæmoph-oboï* or blood funkens.

It might be thought that hemorrhage after the extrac-

tion of a tooth could not, in the nature of things, be a very serious matter. And yet within the last twelve years I have read of two cases wherein such hemorrhage proved fatal. I have myself also treated three cases that proved troublesome. The first, about nine years ago, when practicing in Ohio. I was called in the night to an old gentleman who, in spite of the best efforts of his family physician, had been bleeding for about thirty-five hours. The patient looked up as I approached him, and, with a very sad face, said, "Doctor, how long will it take me to bleed to death at this rate?" Seeing he was very much discouraged, I remarked, "It will take you a long time to bleed to death at this rate." I packed the cavity, using astringents and various remedies that suggested themselves, and still the blood ran fresh and free. At last the cavity was packed with a piece of puff ball or fuzz ball (a genus of fungi lycoperdon) gathered fresh from the field. This was successful. The second case had been bleeding continuously for some hours after extraction. Not having many remedies at hand, I took some fine cut tobacco; this was well packed into the cavity, with the happiest results. The third case is of recent date. A messenger aroused me early one morning, bidding me hurry to see "Miss E," who was bleeding to death. Arriving, I found the hemorrhage had continued from the time of extraction the previous day and all through the night. On clearing out the cavity, the blood could be seen welling up from the bottom like a living spring. Domestic remedies had been used all through the night, with no other result than to make the mouth sore. The patient was depressed with a peculiar foreboding. For years she had had a presentiment that if ever she should have a tooth drawn she would bleed to death. I first took a small piece of absorbent cotton, and putting on it a little pure carbolic acid it was crowded carefully into the cavity, then more cotton was packed on top. For more than an hour I thought this would succeed, but at last the cotton was forced out and the blood came fresh as before. A portion of cotton was then medicated with the styptic balsam, as found in "King's Dispensatory," page 578 (and which I had before proved a good agent in hemorrhage); this was well packed into the cavity, using pressure, and for sometime I thought I had succeeded; but after a time the trouble commenced again. Cotton was again medicated

with the balsam, but before introducing it a little "Monsel's salt" was added to the medicated cotton; it was then crowded into the cavity and more cotton packed on. Finally a bandage was passed under the lower jaw and over the head and adjusted quite snug, so that considerable pressure was brought to bear on the cotton in the cavity. This course was attended with success. There was a space left so that the patient could drink and take liquid food. The pledget was allowed to remain several days. The patient did not die, and it is presumed she will have less faith in presentiments from this on.

A friend, a dentist, tells me that in severe hemorrhage from such a cavity he would pack the cavity with plaster of Paris. With me, plaster of Paris would be a *Dernier ressort*. From the experience above detailed, I would have more faith in Monsel's salt used with compression than any other means I can think of.

HYSTERIA.

BY M. H. WHITNEY, M. D.

HAMMOND, when about to describe the principal phenomena of hysterical origin, expresses his appreciation of Dante's despair at the thought of his inability to describe the horrors of the ninth gulf; but being less a writer than either, perhaps, emboldens me to attempt so extremely scientific a subject as hysteria, however I shall cautiously confine myself to facts that have come to my knowledge through clinical experience. Miss —, aged 16, well developed and apparently healthy, says that from childhood she has suffered apprehensions of punishment for wrong-doing which she was conscious existed only in her imagination, and many unhappy hours have fallen to her lot because of the forebodings that clouded her mind and overpowered her will. As she grew to womanhood still the fancies and evil bodings clung to her, and though physically healthy, a confined or sedentary life had always to be avoided. One day in September, 1883, I was called into my reception room by a heavy fall followed by shrieks from some ladies present, and thus saw her first, lying perfectly unconscious upon the floor, muscles relaxed, respiration normal, pulse hard and rapid, face flushed, pupils dilated and lids closed; in a moment the eyes opened and without a word she arose, unassisted, to the

sofa from which she had fallen. Before leaving the office she suffered three more attacks; the face became suffused, and the head was aching. A thorough examination revealed the existence of no disease other than indigestion; so seeing nothing else to treat I made the stomach an object of solicitude, and gave pulsatilla and bromide of potassium to control the nerves. Two days later she reported and while at the office fell over three times, and that was only the beginning of my woes and her tumbles. At home she would have only two or three attacks during the day but the mental impression produced by visiting a physician professionally was such that I had constant employment in setting her upright, or, better still, in keeping her mind actively employed, which had the effect of averting all disasters. I diagnosed hysteria by the symptoms given above, and because she never received any injury from the falls, no matter how close she fell to any object, it was always avoided. In a few days tenderness was developed over the entire length of the spinal cord, with hyperesthesia of the skin and neuralgic pains in the chest. For this I used the ether spray over the affected parts with success, and applied counterirritation to the spine. Now the attacks became of longer duration by half a minute, and the eyelids twitched during the period of unconsciousness. The potassium bromide failing to exert the desired influence, was changed to ammonium bromide, with remedies to aid digestion, when for a time she did well, but as the clown said, "Ladies and gentlemen, the next thing will be something else." When the falling fits were overcome, paroxysms of dyspnoea were manifested, and the pupils contracted. The ammonium bromide was changed to strychnia one sixty-fourth grain, three times a day. In two weeks after this change she became ill with rubeola, suffering mostly from the vomiting which accompanied the disease, but getting up very nicely, indeed. After this recovery she had no more dyspnoea and has taken no treatment since. One symptom continuing through the entire treatment of two months, was a burning sensation behind the eyeballs, and at times a headache, which latter was usually relieved by sulphuric ether, 5 to 15 gtts. Being myopic, naturally, she became almost unable to use the eyes at all for reading or sewing. Hygienic treatment of baths, exercise, and diet were prescribed early in the treatment. At present she is fleshy and apparently healthy; has an occasional

falling fit, and is not able to confine herself to steady employment; pulse still too rapid and sharp, pupils normal, intellectually, slightly stupid. I believe the predisposing cause of the trouble to be hereditary influence, as she was born of dissipated parents, though not raised by them, and the exciting cause probably was anæmia of the posterior columns of the spinal cord, the principal lesion lying in the cervical region as was demonstrated by the irritation of the phrenic nerve, causing the paroxysms of dyspnœa. The indigestion rose from reflected nervous influence from the dorsal, I think. The reclining posture was always most comfortable to the patient, which is symptomatic of spinal anæmia, as the dorsal posture allows the blood to gravitate to the cord, giving ease and rest. There was certainly a derangement of the sympathetic system, but whether it was primary and that of the spinal cord secondary, or *vice versa*, I do not know. The headaches were evidently angio-spastic, as stimulant treatment relieved them.

Another case of hysteria coming under my treatment originated from uterine derangement, endometritis, cervical hypertrophy and ulceration. From an exalted sensibility reflected along the lines of nervous communication, mental hallucinations arose, voices whispered in her ear, the sensation that an indescribable creature was about to seize her from behind, caused her to grow cold with fear; she imagined that love for home and family had died out of her heart, could not remember the appearance of persons or objects, described her intellectual condition as "thick and dark or clouded." Gynæcological treatment followed by pulsatilla and ten grain doses of sodium bromide three or four times daily, with a change of residence, removed all unfavorable symptoms. A case came to me last winter that brightened my ideas very much and has not added luster to my fame. It does not belong to the hysterical order, but being a neurosis I am reminded of it at this point. Susie H., aged 9 years, in good health until two years of age, after eating striped candy was suddenly taken sick with symptoms of poisoning. Diabetes insipides followed as a sequel, and whenever this was corrected, optic inflammation took its place and photophobia and pain were intense. The optical trouble was greatly aggravated by a low degree of temperature or by a damp atmosphere, and last December during a cold snap I was called to relieve the sufferer. The action of the kidneys

had been suspended for 18 hours, and the right eyeball, somewhat swollen, was so painful as to throw her into paroxysms of agony. From occiput to coccyx was acute spinal tenderness with extreme cutaneous hyperesthesia of the whole trunk. Temperature slightly elevated, pulse rapid and weak, tongue coated white, uniformly, and turning to the right, bowels constipated. When, by the aid of the usual remedies, the kidneys resumed their function, the urine was the color and consistency of new milk. Under the action of diuretics this passed away, the flow was resumed and the eye became better. Atropine in solution, gr. ii to aqua 3j used in the eye, with bromide potassium internally, relieved the paroxysms of pain, and cups, ether spray, croton oil and irritating plaster used successively along the spinal column removed the tenderness. The child did not look particularly anæmic, and, as the eye grew better, I thought by the aid of baths, nerve tonics, remedies to modify the action of the kidneys, and alteratives, to place the system in a proper condition, but made a signal failure. Large doses of rhus aromat. brought the flow of urine to a normal quantity, but the eye became again a source of keenest anguish. For four months the invalid was confined to the house, suffering or resting according to the atmospheric condition, the eye only becoming able to bear the light as warm weather advanced. At present the kidneys continue to deluge the earth, the eye is not as strong as its mate, retina anæmic, a small corneal opacity shows ulcerative action, and trachoma exists. There is spinal tenderness over the lumbar and first and second cervical vertebra, and of the occiput near the foramen magnum, there is weakening of the memory, and listening to conversations on diseases of the eye immediately causes sharp pains in her own eyes. This summer she will take no medicine, as she feels well, and I expect another trial when cold weather comes. A change of climate would be a good prescription, I think, for one of us, dont you? But what shall I do?

SPECIFIC DIAGNOSIS AND MEDICATION.

BY A. L. COPE, M. D., WINONA, OHIO.

DR. SCUDDER, editor of the *Cincinnati Eclectic Medical Journal*, is also editor of a little work entitled "Specific Diagnosis." Through the influence of teachers of the old styled nosology, I was somewhat adverse to what they called liter-

ature for "mercenary motives only," and the little volume did not reach my library until about two years ago, being engaged in practice some fifteen years. The little volume has since been well digested and easily assimilated, requiring no drawing of the angles of the mouth nor knitting of the brow, but proved to be executed with ability and in a manner corresponding with the latest improvements of the science. I have no doubt of its becoming popular. The reading of the excellent book was an impetus for further investigation in the different avenues of the subject. Recently I have been impressed with a portion of the subject which the author has not largely touched upon, if at all. I do not wish to improve nature, but I have really fancied that a good pair of eyes on the back of a physician's head would be acceptable appendages, in order to observe more accurately. The faculty of observation recognized by phrenologists is a power invaluable. This useful portion of a physician's mind should be brought into action upon the arrival of a messenger at your office door. The manner of conduct, tone of voice, and mode of delivering his message, is already a hint in regard to "expressions of disease and appropriate remedies." As much information should be gained at this time as possible, so that your medicine case may be supplied with a remedy probably needed. On arriving at the sick room a very high distinction may be aspired in this line of investigation before seeing the patient. If your patient is suffering severely or thought to be in a dangerous condition, you are not received blandly, but ushered in rapidly. You see an expression of uneasiness and discomfort on the countenances of friends and relatives as you pass in. You are made known at once by a *come quick* expression of tongue and countenance, diagnosing assuredly a severe or critical case. On the other hand, if your case is thought to be a mild one, you are saluted in an entirely different manner. Several years' practice has told us that we will be in a common manner invited in and bid to tarry a moment in an adjacent room until the patient is made to know that his or her medical adviser has arrived, when perhaps a conversation lasting ten or fifteen minutes is indulged in. These are the two common extremes in which we are received, and two important diagnostic points to jot down. Now, then, the variations. What must we observe having already gained

some information from your messenger and the actions of friends, relatives, and nurse at a glance you now observe more closely. If your unseen patient be nervous, any one coming from the room will walk agitated. If the patient be cross or peevish, you will get an infinitesimal dose of the same from nurse or attendant outside. If the patient be vomiting in a back room up stairs, and his attendant comes down into your room, the drawn angles of his mouth tell you so, plainer than words can tell; thus you get a prominent expression before seeing your patient. Can any one who reads this article and has practiced five years tell what that friendly shake of the hand, a smile, and red eyelids mean of a relative? It is an expression indicative that your patient whom you have been called to see has one of those classes of diseases which were severe but now better, perhaps remitting in its type. The deep red, anxious countenance, looking out, and running to the gate looking after the doctor, is sufficient to tell that some one has received an injury requiring the aid of a surgeon. If your patient is hysterical you will notice a nervous, aversive expression on the lookers on. When you are not spoken to friendly and the ability of another physician is talked about, it is certain that you have not the entire confidence of the family. There are but a few outside expressions among many which lead a practitioner to a specific diagnosis and specific medication. An expression of sarcasm, hatred, anxiety, distress, love, fear, or pure meanness, have to be met with a suitable specific, if that be a *placebo* of words. To treat the surroundings successfully and scientifically will add much to the comfort of a patient. I believe in specific diagnosis and specific medication, and it should be practiced by all independent, vigorous, and practical minds engaged in the noble calling of our profession—even to patient, friends, and nurse. Let our students be instructed with these scientific facts, and not the frivolous trumpery of physicians of former days who disguised their auspicious poverty, but practical, successful triumph will be meat and nourishment for their craving brains.

FROM EAST "WESTWARD."

BY W. WALTMAN, GALION, OHIO.

ALL hail the CALIFORNIA MEDICAL JOURNAL, the harbinger of eclectic medicine and collateral sciences, throughout the crystal bound cañons, rocky peaks, and diversified plains of the golden slope of the great Pacific.

All hail, aye, thrice hail, the welcome message that greets us each returning month with no uncertain sound concerning its mission and success on the frontiers of civilization, art, and progressive medicine.

All honor to the manhood and intrepidity that takes up its abode in the wilderness of foggyism, to fight on the side of right, by voice and pen, until tyranny and intolerance are among the things that are past. Hence this voice of peace, good-will, and success to your noble mission. Success, it appears, is already stamped on your institution of medicine, which is most certainly a desideratum in the land of gold, an oasis to the seeker after truth and progress in the art and science so dear to our hearts. You have most emphatically merited the support and good-will of all eclectic physicians of the East. It cannot but prove a source of honor to the profession over all the vast domain of our happy country. Ere long error must give place to science grounded in fraternal good-will between the different sects, clad in the habiliments of reason and a more noble manhood, and hence a much less per cent. of mortality, and a much greater alleviation of suffering humanity.

Let the car of liberal science and art in medicine roll on, gathering here and there a passenger, until all dissenting voices shall be gathered within the folds of liberality, and in unison, harmony, and good-will, all will march to certain victory, when sectarian prejudice in medicine will be no more. God speed the day.

A CONSULTATION.

I located in this city the first of last May, fitted up an office, and hung out my sign on Main Street, No. 30. This city boasts some eight M. D.s beside myself, and in calling on them soon after coming here, I noticed a great reluctance of one, a Dr. De C——, an eclectic, a young practitioner, to even talk or converse with me, and his manner seemed to say to me, "I don't want you here; I know it all," etc. As time rolled on I was called to see a young lady of six-

teen suffering with a severe congestive chill, with a special tendency to the left lobe of the liver and the pericardium. I prescribed ol. black pepper and hot pediluvia. Soon reaction took place, with high bounding pulse and subsultus tendinum. I prescribed four grains chloral hydrate hypodermically. The patient became delirious, as is usual in such cases, and the parents got frightened and in my absence sent for the above named M. D. and notified me to come at once and hold consultation, etc. I went over, found the M. D. sitting by the bedside of the patient. He was very loth to speak to me, and put on a look of profound wisdom, and a stern countenance, holding the patient's hand in his and looking very wise. After a little time I asked the M. D. if he had examined the patient, to which he replied, very emphatically, "*Yes, sir, I did,*" all the time displaying the wise look. He got up, took his hat, and soon sat down again, and once more examined the patient, looked more wise, yea, appeared to be the embodiment of wisdom, now, and answered me in monosyllables only. Again he rises, puts on his hat and starts toward the door. He now nods to me to follow him. Some friends were crying, while I was assuring them she would be all right again in twelve to fifteen hours—they seemed now to put no confidence in what I said. I did not then know what he had said to them before my arrival. Well, I meekly followed the dignified gentleman out. He took me some distance from the door, soon he stopped, and, facing me, asked, sternly, "What did you give her?" I told him. "What did you think ailed her?" I told him, "A severe congestive chill with a special tendency to left lobe of liver and pericardium." Then said he, "Sir, do you not know that it is impossible for her to have such a chill and five or six hours after the chill to have the pulse she has now?" Her pulse was 100, full, and much excited, as is usual in reaction after such chills. All this he said in a very pompous manner. She was now very delirious, with her arms and legs in constant motion. "Well," said he, "now we will give her aconite and ipecac, for the congestion, if she had any, was in the stomach and bowels." "Why, Doctor," said I, "will you give aconite on that strong, full, bounding pulse?" "Yes, sir," emphatically. "Where did you get your medicines?" said he. "Of Thorp & Lloyd Brothers and Wm. S. Merrell Chemical Co." "Then," said he, "they are good for nothing."

Don't you know that the dried root is good for nothing?" "Yes, Doctor, but mine are from the recent root." "No they are not. Did you give anything hypodermically?" "Yes, I gave four grains chloral hyd." "Don't you know that it is dangerous to give chloral, opium, or morphine? It is not safe, sir, therefore you ought not to give it at all."

Then we went into the house and he took the lead in ordering medicine and giving directions, entirely ignoring my presence. It seems the gentleman had previously treated the family, and took this method to regain their confidence.

Again I urged him to give the patient gelseminum and ver., to which he consented, under protest, as her condition called loudly for the remedy, and in a short time the subsultus ceased. He did not deign to tell the friends that I had done about what could or ought to be done in the case, but on the contrary, by every motion, he told them I did not even know what ailed the patient, and with an ostentatious air changed every bit of the medicine I had prescribed. The case was doing as well as possible, and all it needed was a little time, all of which he knew, if he knew anything about the case. He is either very ignorant or very "charitable," for he volunteered all his advice, all his lecture was spontaneous; but I must confess I am too obtuse to profit by any such teaching, and never before did I know that a severe chill (congestive) was not succeeded by a high, frequent, bounding pulse as soon as reaction took place, be it an hour or more or less, my wise counselor to the contrary notwithstanding. I must confess that I felt abashed and chagrined, being a stranger, at his bombastic and impertinent demeanor, but am happy to be able to say that in a practice of nearly twenty-eight years, the above is only the second one who has treated me in a like manner in consultation; hence, as a rule, I am constrained to say from experience that physicians are endowed with good sense, with now and then an exception.

OXYDENDRON ARBOREUM (Sourwood).

Mrs. B., aged 44 years, nervous temperament, quite fleshy, weighs 185 lbs, married, has four children, the youngest four years old; good recovery from birth of last child. About the time she weaned it she became troubled at times with a distressing dyspnoea to such a degree that frequently she could not lie down at night. After about a

year dropsical effusion made its appearance, and shortly the whole body was wonderfully distended with the effusion into the cellular tissue.

I prescribed sourwood, two four grain pills every morning and evening, increasing one pill each dose every day till the dose was nine pills, then again decrease in the same ratio till the dose is two pills, then increase again the same as before. In addition to the pills, I prescribed dig. fl. ext. ʒss , ver. ʒss , water ʒ8 ℥ s , a teaspoonful every four hours, hot sponge bath twice a week. After the third week the swelling gradually decreased, and in eight weeks I discharged her, cured. I have had extremely good luck in all dropsical cases with the sourwood extract.

THE BONDAGE OF THE BANDAGE.

BY LYMAN WATKINS, M. D.

THE custom of applying the post-partem bandage is going out of fashion, as such a damaging superstition should. Doubtless in after years, it will be pointed out as one of the ancient absurdities. But while the physician may not have the least confidence in the efficiency of this abdominal binder, he will meet with much opposition from the laity when recommending its disuse. Old women, male and female, will be opposed to any innovation into the domain of obstetrics. Often traditional custom, whose only virtue is its age, will prevail against your advice, and the application of the bandage will be insisted upon. In such cases it will be better to put it on, for, should any accident occur farther on in the case, it would be attributed to the refusal of the physician to apply the bandage, and would be detrimental to his practice in that branch of professional duty. On the other hand many females, exhausted by labor, will gladly dispense with the annoyance of the application of the post-partem bandage. A female who has passed through a tedious and severe labor needs rest more than bandages, hence do not disturb her. Often the exertion required to get the bandage in position may give rise to profuse hemorrhage.

When women come to understand that the bandage does not conduce to the beauty of their forms; that it is no benefit in any other way; that it is a fruitful cause of many uterine disorders, then this practice will be done away with and

another cherished hallucination banished from the parturient chamber. Women will not begin to understand this until physicians begin to teach it, and it is our duty to teach if we are clear upon the point ourselves. "It is the duty of every physician to inform those coming under his influence of the futility of trusting to the obstetric bandage, or, if he cannot conscientiously do so, to review his opinion upon the subject and see whether his own confidence is not misplaced."

—*T. Gailliard Thomas, on "Diseases of Women," fifth edition, page 49.*

ELECTRO-THERAPEUTICS.

BY F. A. JOHNSON, M. D., PORTLAND, OR.

THERE is of late a good deal said, as well as written for public tion in many of our medical journals, relative to the therapeutical and curative effects of electricity. I have had eleven years of experience with this element, and it is wonderful what cures I have performed with it. I will here relate a few cases of several hundred which have passed through my hands. Since 1873 I have cured with electricity alone at least seventy-five cases of stricture of the urethra, twelve cases of hypertrophy of the prostate gland, as many more of pterygium of the eyes, of which there are four varieties—cellular, fatty, vascular, and fleshy. It takes but few treatments to dispose of either variety. Conical cornea of the eye, capsular cataract, or opacity of the capsule of the lens, conjunctivitis, ioritis, etc., etc. In fact, anything growing upon the exterior surface of the eye can be cured by a few applications of electricity. A person should, however, have a very good knowledge of electricity or great harm may be done the patient. It is a dangerous element in the hands of an inexperienced operator. Before using electricity a person should first make a study of it and learn the difference between the positive and negative, and its physiological effects upon the physical constitution of man. For almost everything the positive is the pole to be used in scattering tumors, cancers, etc., etc.

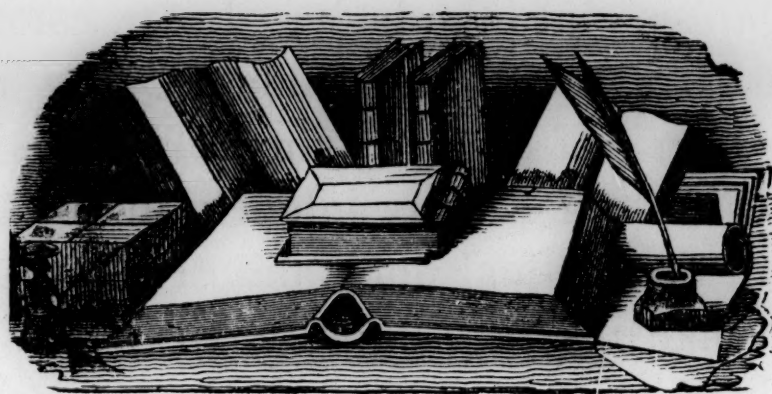
In 1882 a lady came to visit me who had a fibroid tumor of the uterus; age 41, rather dark complexion, weight 145 pounds when in fair flesh. She said to me after entering my office, and before taking her seat: "Doctor, I have no health; have been running after doctors for the last nine years. I

have been treated by fourteen different doctors," and named them, and said she grew worse all the time. "And lastly I have come to you." I asked her if she had been taking drugs all this time. She answered me quickly, with a flash of fire in her eyes, "Yes, I am a traveling drug store." I could not doubt a word she said; every gesture verified the truthfulness of her words. I made an examination and found a fibroid tumor more upon the left than the right side of the uterus. I, with my long, slender, silver probe, entered the foramen or *ostium internum*. The instrument after entering about one-half inch ran away to the left on a very circuitous route up to the fundus, distance marked on probe six and one-half inches. At no other juncture could the probe be made to enter between the tumor and uterus; using my best judgment in the matter, the organ would weigh not less than two and one-half pounds. I now reported the case to her. She asked me if I could help her out of this matter without using the knife. I answered her as quickly as possible, "Madam, if you will submit to my mode of treatment and follow my directions in every way which I may dictate, I will make a sound woman of you in less than three months. Will you do it?" Without stopping to deliberate for one second, she said, "Doctor, I will do anything you may ask of me for the sake of being well once more." This was on May 22d. I commenced electrical treatment at once, using one of Dr. Jerome Kidder's electro medical batteries, at the same time using a wash prepared as follows: Salicylic acid grs., xxx; boras de soda, ʒss ; cimicifuga racemosa and ergot, fl. ext. aa ʒj ; glycerine ʒ jv; aqua dis., q. s. to make ʒ viij . Take one tablespoonful of this mixture and add to Oj of water as hot as can be borne and seat the patient over a chamber with a good syringe and uterine point, inject high up; have the patient do this twice a day, morning and evening. On June 3d I made another examination and found the tumor much diminished in size and patient feeling better in every way. June 16th, found tumor nearly gone. I forgot to say I gave her one treatment a day up to about this time, and now am giving two treatments per week. July 2d, made my last examination, and found the tumor gone, and the uterus perfectly normal, and my patient was dismissed and went home with instructions to continue the use of the wash once a day for at least one

month. About thirteen months after, I met accidentally with this lady, who told me she still remained well, and had become as regular as a clock. When I first saw her she told me her catamenial difficulty was very irregular and very profuse, often flooding terrifically, and often having to call a doctor to stop it. I asked of her the privilege of using her name to verify what I had done for her, but she would not consent, for fear of the doctors, etc.

My next case which I consider worth reporting is as follows: Mrs. M. M., of this city, came to me on the 28th of July last, and said, "Doctor, I am a great sufferer." She is a lady of about 45 summers, a brunette, is married, had one child eighteen years ago, has been very delicate all her life—so weak from loss of blood she had to be steadied by the second person; but after seating herself she commenced about in this way: "You see, doctor, how large I am, yet I am a small person. I have suffered untold anguish. I went home last fall to the State of Maine, to die, but on spending a few months with my folks I seemed to recover to some extent, and concluded to return to my home and husband again; but after arriving here I got worse, so you see what I am. Can you do anything for me? I made a very thorough examination, and to my great surprise I found a fibroid tumor as large as a man's head. She said she had not stopped flooding for at least five weeks, "and oh, such pain," pressing her hands just above the symphysis-pubis, "and through to my back, commencing about one o'clock and not passing off before eight or nine in the evening. It would be a pleasure to die." I said to her, "Madam, do you know that you have a large fibroid tumor?" "Well," she said, "Dr. Jones, of this city, examined me about two years ago, and he said I had a fibroid tumor, and for awhile I expected to put myself under his charge; but by some misunderstanding between us the matter was lost sight of, and here I am, nothing done yet." In my examination and measurement I found across the os to be four and three-fourths inches, from the os to the fundus nine inches, at the widest place eight and three-fourths inches. This measurement could not be made precise. I tried to introduce my probe, but could only pass it three-fourths of an inch. I then tried to introduce it between the tumor and wall of the uterus, but no entrance could be made; all seemed as hard as though I were strik-

ing against a man's head. It was a firm, fibrous, incompressible body, and very heavy. I have no doubt but if it could have been weighed, it would have weighed not less than eight or nine pounds. I commenced electrical treatment July 28th. On August 6th, from examination, I found the tumor much reduced in size in every way. Flooding and pain had entirely subsided at the third treatment. My next examination was made August 14th; found the tumor nearly one-half gone. My next was August 22d, and I found it at least two-thirds gone. Up to this time have been giving one treatment a day, using the same wash as was used on patient No. 1, and the same way. September 12th, I made another examination and found the tumor almost entirely gone. Have been giving treatment every other day since August 22d. September 16th, the tumor was entirely gone, uterus looking a little flabby. I am giving only two treatments a week; after this date shall give but one per week. The patient is not well, but is doing her own work, with the exception of washing, and would do that if her husband would let her. It is now September 25th, and I am still giving the patient one treatment per week, and shall continue to do so until the first of October next. I shall then discharge her for well. She has gained in flesh since I commenced the electrical treatment, almost seventeen pounds, besides losing one-half that weight in the tumor. Now, Mr. Editor, this is a wonderful hard story to believe; but what I have written you is true to the letters which declare it. Mrs. Anna Myers, as well as her husband, are most amiable citizens, residing at No. 9 Third Street, Portland, Oregon. If any doubts arise respecting the truthfulness of what I have written respecting this most estimable, good lady, she will be made happy for the privilege of answering any communication from unbelievers.



EDITORIAL.

Micro-Organisms in Disease.—A little work by Dr. Black, recently published by Blakinston Son & Co., Philadelphia, affords a comprehensive survey of the steps through which the theory that contagium depends upon minute organisms, has been evolved. Doubtless much irrelevant speculation has attended the study of this subject, and that many erroneous conclusions have been arrived at, but, out of the chaos of conflicting opinions and false premises, time may bring definite knowledge which shall afford vantage ground for effectual prophylaxis. Cholera, yellow fever, and lesser scourges, may then be viewed with less of the dread that now attends their invasion.

Indeed, it seems there have certainly been steps taken in confirmation of this prediction, though more positive demonstrations are yet lacking to substantiate all that has been hoped for.

The germ theory of disease, though recently much agitated, is not, according to all accounts, a new one. Even the ancients vaguely hinted at the possible existence of a something that could pass from sick to well—a “constitutio pestilens”—a “genus epidemicus,” not clearly defined, but regarded as a principle concerned in the propagation of epidemic and contagious diseases.

Dr. Black refers the first definite announcement of a belief that disease is propagated by germs to the time of

the Roman Empire, when De-re-Rustica, Varro, and Columella attributed the origin of malarious fevers to the entrance of minute organisms into the body. Later, color was added to this by the revelations of the microscope, which demonstrated the existence of minute living organisms invisible to the naked eye, and when Leuwenhoeck, in 1677, discovered spermatozoa in the seminal fluid, and erroneously supposed them to be animalculæ, new impulse was added to the doctrine. It now having been apparently demonstrated that real animals were living in the bodies of men, the doctrine of the germ theory became almost universally accepted among the profession. Visionary theories and descriptions of the character of these germs, however, soon became so ridiculous as to originate a feeling of suspicion and distrust in the truth of the theory, and finally the doctrine grew into disrepute and was cast aside as one of the fallacies of the past.

The study of fermentation then gave rise to the theory of zymosis, and this was strengthened by the discovery of Jenner that vaccination gave immunity from small-pox, the introduction of a small particle of virus into the circulation giving rise in time to the development of the symptoms of the vaccine disease, and finally to such a change in the organism as rendered it no longer susceptible to the influence of variola.

In 1838 Schwan discovered the fact that fermentation was the result of the growth of the yeast plant, and that the resulting alcohol and carbon dioxide were but excrementitious products of the plants. He further announced that putrefaction would not occur without the presence of certain minute organisms in the fermenting mass—that a fermenting material upon being boiled to destroy these organisms ceased fermenting for the time, and if air be only admitted in a heated state, or by being filtered through sulphuric acid to deprive it of organic bodies, it did not ensue afterward.

Leibig, who for a long time exerted a powerful influence over the opinions of scientific men, proved a stubborn enemy, however, to the doctrine that fermentation depended upon organic development. He maintained that it was the result of chemical action between the molecules of the various elements entering into the composition of bodies subject to fermentative changes, and so well did he argue this that the vitalists were long the champions of an unpopular cause, and the subject of micro-organisms as factors in disease correspondingly lagged. He argued that the experiments of Schwan proved nothing in favor of the vitalist idea of fermentation, as he asserted that heat or the action of the acid was sufficient to destroy the molecular forces upon which the fermentative changes depended.

But it remained for Schroeder, in 1854, to upset this theory of Leibig. He admitted air to fluids subject to fermentation through cotton batting, with the idea that this would prevent the ingress of any solid particles in the shape of spores or germs, and succeeded in demonstrating that sterilized fluids thus treated were as safely protected from fermentation as though hermetically sealed.

It still remained necessary to prove that the floating particles were living organisms; for it was possible to assert in the then light that the breeders of fermentation might as well be dried particles of formerly decomposed bodies, which set up a renewal of the process in fresh fluid as of living germs possessing the power of reproduction.

This was accomplished by the sealed flask experiments of Mr. Pasteur, although he is not credited with being the inventor of this mode of study, history demonstrating that Needham, of London, nearly a century and a half ago devoted time to the same line of investigation. Pasteur, reasoning that the yeast plant grown in hermetically sealed flasks would finally consume all the gluten, a substance necessary for the continuation of the growth of the plant, according to the chemical theory of molecular disturbance,

sterilized a fluid containing no gluten and carefully sealed it. "After this had passed through the stage of fermentation, another flask was prepared in the same way; and under the utmost precautions that nothing else should be introduced from without, a drop was taken from the first with a pipette and added to the second, and so on to the fiftieth generation, and in many of his experiments more than this number." Throughout these generations the yeast plant maintained its identity and to the hundredth generation was capable of producing vinous fermentation.

In this course of investigation Pasteur determined that the vinous fermentation, the acetic fermentation, and the lactic acid fermentation each depended on the growth of a living organism peculiar to the particular kind of fermentative process, each preserving its peculiarity of form and identification under microscopic examination.

Following this course of investigation he took up various putrefactive substances, and found the active agents here to be of organic character; but instead of a vegetable growth, they were found to consist of micro-organic creatures, which he termed "vibrios," and which he found to multiply with remarkable rapidity in the depths of the putrefactive mass, as far from the air as possible. "These are the proper authorities which administer upon the ruined estate of dead bodies, animal and vegetable."

The vibrios may be assisted by countless swarms of bacteria, micro-organisms of different character which require oxygen for existence and swarm upon the surface of putrefying bodies. But the vibrios were grown by Pasteur in flasks from which every particle of free oxygen had been removed. He considered them the true agents of decomposition.

But there was one point in these experiments open to criticism. With the utmost caution possible in transferring the organisms to the flasks, some small amount of the fermenting fluid was conveyed with them, permitting the

assertion, on the part of the advocates of the chemical theory, that the fluid, instead of the organisms, gave rise to the fermentation which followed.

This was the difficulty which Koch removed by certain highly ingenious methods. In order to recognize the minute organisms more readily, he devised a plan of staining them dark blue with an aniline staining which rendered the tissues transparent, practically removing them from obstructing the perfect view of the organisms. This move rendered it possible to demonstrate that the normal tissues were free from organisms, contrary to the formerly expressed views of Billroth and others, Billroth soon admitting the incorrectness of his earlier impressions.

After a brilliant series of experimentation on the subject of micro-organic life in its relation to disease, Koch overcame the difficulty found in Pasteur's flask experiment by cultivating the organisms on dry slides.

"The plan was this. Suitable material to serve as soil or food, for the sustenance of the organism, was mixed with albumen and sterilized by heat. This was carefully reduced to a jelly that would solidify on cooling, and spread in a thin layer on glass slides suitable for microscopic examination. When the slides were thus prepared, a needle was dipped in the fluid containing the organisms and drawn quickly across the surface of the prepared culture medium, in such a way as to distribute the few that adhered to the needle along the line of its track. This preparation was then sealed up or otherwise protected from contamination, and kept at a suitable temperature for the growth of the organisms, and occasionally examined with the microscope. It was found that the organisms grew well on such soil or food; also that it required the utmost care to prevent contaminations. These, however, could be detected by microscopic examination, and, whenever found, rejected. It was also found that the different organisms present in a fluid could be separated by this method of culture; for in drawing the needle point along the surface of the solidified jelly, the organisms would often be distributed singly, and would develop in little groups that could be seen by the naked

eye. The character of each could be determined by the microscope. These were generally found in the form of little flakes on the surface of the jelly, and each could be detached with a needle and conveyed to another slide, or, when desired, to a culture fluid, and kept pure. From these pure growths the organisms are transplanted to other slides, or culture fluids, at will, and for any number of generations, and kept absolutely pure. Inoculations were made with these pure cultivations; and such inoculations were found constant in their effects, whether taken from the fifth or one hundredth generation. Thus it is believed that the difficulty of excluding the chemical theory of fermentation has been accomplished."

A number of the micro-organisms of disease are asserted to have been defined by these methods. Among them may be named the bacillus anthrax—the contagium of the European cattle-plague—the organism of chicken cholera, the bacillus of septicæmia, the micrococcus of pyæmia, the cocco-bacterium of gangrene, the bacillus of erysipelas, the bacillus of tuberculosis, the bacillus of leprosy, the spirillum Obermeiri, or the virus of relapsing fever; and, lastly, the comma bacillus of cholera.

Like almost all explorers, Koch is probably over-sanguine regarding many of his discoveries, and time must temper and try the truth of his assertions. The profession at large will, doubtless, exercise due conservatism in the acceptance of his claims, but if one-half prove true as put forth by him it is a gigantic stride towards scientific medicine, and promises big results for the future.

Purified By Fire.—This time it is something else. No one can accuse us of being young in experience, if young in years. If any of our Eastern colleges can boast of more than ours at the same age, let them put it in their announcements.

From struggles with early impecuniosity to false accusation of ghoulish intent, we have passed to a trial by fire, and, lastly, a deluge from a zealous fire department. Thank-

fully we write it, there has been no brimstone in the programme, as yet.

About one o'clock P. M., the 11th of September, a column of smoke was discovered issuing from our college dome, and brief time sufficed to discover that the fire demon had made too effective an assault upon the upper part of the building. The dome was left by the fire department a skeleton of charred frame-work; the dissecting room was badly singed, and a portion of the roof of the main building was destroyed. Four engines played upon the fire long enough to send a flood rushing down the stairway for more than two hours, while the anterior half of the building was saturated throughout.

We are well insured, however, and already the builder is repairing the breach, so our winter term will begin promptly on time with everything in order for a profitable session.

We have attended a number of fires before this, and must confess have rather enjoyed the excitement and novelty of those occasions; but this time it was a little too near home.

An eclectic institution is too badly needed on the Pacific Coast for the cremation of ours. We have delegated the next fire to one of the medical institutions of San Francisco. Oakland has but the one, and loves it too dearly to thus be sundered.

Quackery and the Medical Laws.—Just to what extent and in what way a physician may consistently advertise himself, is a question on which there are many different opinions. It also becomes a question whether he has a right to advertise as instanced by the fact that laws are created forbidding such practices. Codes of ethics of various degrees of stringency are enacted by the various medical societies, declaring what is legitimate in this line. Legislators whose knowledge of the matter is little, and whose interest in it is less, are influenced by medical men to protect the respectable part of the profession by laws regula-

ting the practice of medicine. These laws, then, are the direct outgrowth of, and prompted by the medical profession.

These medical ethics and medical laws, created as they are by those who are established and influential, may be made to discriminate against others lacking the power and influence, but who are equally virtuous and deserving. In other words, there is a disposition by those in power to establish a monopoly. This state of affairs exists in the allopathic school more particularly, and the younger members are whipped into line, and obey their masters under penalty of disgrace and ruin. From this source laws may be dictated and got upon the statutes which would embrace the other schools of medicine (eclectic and homeopathic). On account of this state of affairs many well-meaning professional men declare themselves in favor of "free trade" in medicine, and those who are *not* well-meaning are very zealous in their advocacy of such a state. All this latter class want "is to be let alone." Looking at the matter in one way the latter proposition may seem well enough—that if a medical man choose to accept the odium of disreputable methods of doing business he should have the right to do so. But you might make the same plea for any kind of disreputable conduct, and that no statutory laws were necessary. To make these odious practices violations of the statutory laws, place them before the public as they ought to be. There are some minds so obtuse and indelicate that they can feel no shame from, or in any way discredit, the practice of the most arrant quackery, and such should be governed by laws, for reasons which we will advance farther on. These advertising doctors, if the newspapers would publish it, would fill our papers with the most disgusting and loathsome pictures, and particularize in language indecently obscene, illustrative of the diseases for which they possess the only remedy. There is something so manifestly indecent and demoralizing in its influence on the commu-

nity in these advertisements that any one, looking at it from a proper stand-point, could not think of encouraging it. The aim of their productions is to excite the imaginations of the credulous and inexperienced, by claiming symptoms which almost any one may have when in fair health, are premonitory signs of the most dangerous maladies. A few days or weeks of apprehension on the part of such a person will so disorder his organism that he will become really depressed in health. In this state the charlatan finds him and persuades him that he is the only mortal who understands his case or can help him. He obtains all his available cash and proceeds to practice his deceptions on him while it is to his profit. Is this most debasing of crimes not to be tampered with by our laws? We do not say that all who advertise are so unprincipled, but all receive their patronage through the credulous and ignorant.

It is startling to the profession how few outside of it look at this matter as they ought. Most people concede the physician the right to advertise his knowledge as the merchant does his wares. The case is quite different. There is no way of determining by inspection the skill of the physician. He deals with human life, and should be known to be efficient and honest through his deeds, and not by his own boasting declarations. In critical matters of law you go to a man who has made a reputation in the community for his ability and reliability. What would you think of the attorney who would fill a couple of columns boasting of the number of people whom he had kept out of the penitentiary, or had enabled to avoid their honest debts? What would you think of the minister who would advertise his ability to wake up the Almighty with a more heart-stirring prayer than any other who ever stepped into a pulpit? that the souls he had saved from hell were innumerable, etc., etc.? And yet, these men would do infinitely less harm than the advertising quack. Almost any one

could see through the shallowness of such claims on the part of the lawyer and clergyman, but there is so much of mystery, to the unprofessional mind, regarding diseases and their methods of relief, that the afflicted are easily deluded into the snares of the dishonest pretender.

Our grandfathers scarcely knew they had a prostate gland, and such a disease as spermatorrhea was unknown, but now these are almost household words. Why? Because of the quack advertisement, wherein diseases of these parts are so graphically described. An occasional nocturnal emission, a perfectly physiological occurrence for a continent man, is construed into a premonitory symptom of ailments, such as loss of vitality, insanity, etc. The quack is a most despicable character—an excrescence upon the profession of medicine.

Besides the suppression of quackery, we have other uses for medical laws, and that is to raise the standard of medical education. A medical diploma is so easily acquired nowadays, considering the advance in other scientific and educational affairs, that it ceases to be a credit to possess one. Let medical colleges adopt a more rigid curriculum and add another year to their requirements, and only those who have a deep love for the profession will enter it. We know whereof we speak regarding the effect of a medical law on the standard of the profession. Before California had a law or an eclectic college, a great portion of our physicians were undergraduates or graduates of bogus colleges, and many of them were advertising themselves through the newspapers too freely. Since our Board and college have been in existence, those who were honorable have attended college and graduated. Some have left the country. Advertising has been restricted, and the whole eclectic profession materially improved. It can be seen that laws have a healthful restraining influence on the moral status of medicine as well as on other departments of society. More anon.

C.

“Principles Evolved by the Founders of Eclecticism in Medicine.”—Eclectic medicine should be marked by the broad and liberal views of its exponents. While it is true that liberalism in medicine may be carried to extremes, so far that it may prove an injury, there is a happy mean which allows rationalism free scope—which not only thinks for itself, but does not ostracize its neighbors for exercising the same free-born privilege.

Many eclectics so called, commit the error of expecting every other eclectic to see as they see and think as they think. This is as unreasonable as it was for allopathy to demand that medical men should adhere to the lancet and calomel in by-gone days. Heterodoxy in medicine has advanced its capacity for good very much in the last half century, and it will still serve the same purpose in time to come. True, well substantiated facts should be generally recognized and observed in the treatment of disease, but to say that a brother physician is wrong because he differs in opinion from us, is taking upon ourselves an assumption of infallibility quite out of keeping with the true condition of the case. It is quite generally conceded that only one perfect man ever lived, and he was crucified tolerably young. Therefore, it would seem a little dangerous to even assume perfection.

In our student days we believed many things infallible connected with eclectic medicine which we now doubt with most vehement doubting, and we now believe some things upon which in those days we would have looked with aversion. We believe we have learned that the most severely orthodox people in many matters of this world are those who know the least about them—blind followers in a blindly accepted faith, who follow as a flock of sheep the bell-wether whithersoever it goeth.

As eclectics, we ought to industriously cultivate a knowledge, not only of medicine, but of all its allied sciences, that our scope of vision may not be narrowed by prejudice, super-

stition, or veneration for untenable propositions, because our grandfathers enunciated them. If we would go into antiquity for our authority, we might travel back to the time when our ancestors did not understand the manufacture of a stone hatchet, nor possess the wherewithal to clothe their nakedness. If man has progressed since then, why should the evolution have ended with the fathers of eclecticism?

Professor Howe handles this subject with his usual ability in the *Eclectic Medical Journal* for September:—

“Nothing is more common in a *Reform* convention than a blatherskitish harangue upon the necessity of adhering to the fundamental principles enunciated by the “fathers.” The speaker usually waxes warm when he alludes to those in the organization who have been rash enough to think for themselves, and after a familiar acquaintance with old landmarks have been bold enough to move on a bit. When such are denounced in withering terms, a rumble of applause is elicited. Why the signal of approval? Simply because there are those among the laity who are nothing unless sticklers for the doctrines of the fathers,—they know something about them, and little if anything else. They would have eclecticism, pure and complete, spring immaculate from the brain of Samuel Thomson or Wooster Beach, and pronounce anathema upon those who would be irreverent enough to take off, add to, or modify a jot or tittle of what has been canonized by the saintly founders. These faithful disciples will talk about liberality, progress, and the tyranny of proscription, yet in the same breath stigmatize an independence which would advance beyond paternal guideposts, and are brazen enough to censure the exercise of a little personal liberty. They, the proscriptionists, do not recognize the inconsistency of denouncing an allopathic fault and exalting the same as an eclectic virtue.

Eclectics boastingly claim freedom to do as they please, and to be at liberty to draw (select) from every source of information, yet do not some of them belabor such as depart a little from the principles of the fathers, and who exhibit the hardihood to browse in the fallow fields of regular medical literature? If the founders knew it all, why use the term *eclectic*, which means select or choose, presuming, of

course, that a champion of the cause would instinctively be wise enough to take the good and cast the bad away? If there be no occasion to seek nuggets in new diggings, but to keep on delving in old mines, why not fence them in, and not pretend to be progressive? It is not becoming to cry aloud for liberty of conscience, and in the same bawl woe-fully berate those who exercise it. Would it not be better to say, "Go thy way, free-thinking brother, there is room enough in this big world for thee and me"? In that expression is the spirit of liberality which we have claimed for ourselves and avowed for others.

It is presumed that Thomson and Beach were both wise and good, and that they are in chief the founders of eclecticism in medicine, yet did they know so much that we are to be satisfied with what they knew? After we have formally acknowledged the greatness and goodness of these pioneers, we need not spend the remainder of this short life in watering their graves with tears, but we should cultivate ground they broke up, and make it bring forth tenfold. We should introduce a variety of seedlings, and by industrious tillage secure abundant harvests. Because our forefathers raised only turnips, the example is not a reason why we may not profitably raise tomatoes. Revere the fathers, but not consume so much time in the act that we fail to improve ourselves.

Epiphegus Virginiana in Nervous Headache.—We recently have been treating a chronic and very obstinate case of nervous headache, originating from irritation of the spinal centers; the result, in all probability, of a primary uterine difficulty.

The headache is marked by intense supraorbital pain of a throbbing character, with redness of the eyelids, suffusion of the conjunctiva, and the pain finally extends deep into the orbits. The carotids throb tumultuously, and the patient suffers intensely, not only from pain, but from hyperæsthesia of the nervous centers.

We have been able to ward off two attacks successfully by the use of the above named remedy, an old one to eclectics, by the way, and more familiarly known as the

orobanche virginiana or beech drops. It, however, is a new one so far as this use is concerned.

Add twenty drops to four ounces of water and give a teaspoonful every fifteen or twenty minutes until four or five doses have been taken, then every hour until the pain subsides.

The positive pole of a faradic machine was applied to the frontal region for a few minutes, while the negative was held to the feet. No doubt this aided in relieving the attack, but the epiphegus afforded enough benefit to prompt this mention of it.

Something New in the Poultice Line.—We hear of many kinds of material for poultices for different diseased conditions, and believe there is a great deal of nonsense in ascribing specific virtue to this or that special one, for the warmth and moisture usually supply all that can be afforded from the best.

But we have something new to offer in this line, and improve this occasion to assert that it gets away with everything else extant, in certain conditions.

Every one knows who has been there, that an inflammation of the fibrous structures of the hands is attended with little suppuration and excruciating pain, and though this is not a common affection, it is sufficiently frequent in its occurrence to demand something better than flax-seed, elm, or bread and milk poultices, for these afford but little relief.

Desiring some cranberries, as there seemed a slight erysipelatous tendency in a severe case of this kind occurring about a year ago, we concluded to employ as a substitute that which was the more readily attainable, a poultice of fresh stewed apples. The fruit was prepared as though for the table, spread on cloths, and applied to the inflamed part.

Though hypodermic injections of morphine had been imperatively demanded at night for several preceding days,

the pain and swelling rapidly subsided under the influence of this application frequently renewed, and the second night the patient rested tolerably well without his accustomed opiate. Speedy recovery followed, with but little suppuration, though the thumb (the part most affected) was of little use for months.

We believe this will excel cranberries in that class of erysipelatous inflammations demanding an application of the kind.

Professional Jealousies.—Professor Pitzer wails over the disposition of the profession at large, and the eclectic profession in particular, to ignore all excellence except that which originates at home. He mentions achievements of members of the college with which he is connected, which were passed unnoticed by the regular press, and almost by the eclectic journals of the land.

We are sorry to believe that the worthy gentleman, whom we do not know personally, but, nevertheless, respect for many able qualities, is a little cynical in some of his accusations. The eclectic press, it seems to us, is disposed to notice the greater portion of eclectic progress. We have believed it very liberal in these matters. As editor and chronicler, we made a note of Dr. YOUNKIN's operation of splenotomy, but the printer, by some blunder, omitted to put it in the pages when making up the JOURNAL. We have duly chronicled the hypodermatic use of gelseminum, the use of galvanism in organic stricture, and that of euchlorine in diphtheria. We still wait for new developments from St. Louis, and shall be glad to chronicle and credit all that which bears the appearance of being good, and we surely anticipate nothing else from that quarter.

We are in favor, first, of respectability among our branch of the profession, then harmony coupled with good-natured rivalry and friendly criticism. With these we will grow, for we are all striving to excel. Personally, we admit that

our best impulses are for the California Medical College, but we would consider ourselves beneath the notice of decent men if we possessed no sympathy nor interest in those who should be pulling with us. We believe the only small part of us is our feet, and even here large shoes fit best.

Were we disposed to find fault we might refer to a number of good things enunciated in the JOURNAL which have been allowed to pass unnoticed by the press, but we rest in the blessed assurance that every dog will have his day. Bye and bye all the discoveries of eclectics will creep into allopathic journals as the discovery of some long titled Londoner, while a Hale will avow that they are but the verification of the law *similia*. Then euchlorine, gelseminum hypodermatically, and various other good things now not so prominent, will "rise and shine."

Professor Crowley in the East.—Several communications of a private character have reached us from the Doctor since his departure. He spent the first half of September at his mother's home in Fillmore, N. Y., where he enjoyed all the relaxation that perfect freedom from responsibility and care coupled with the presence of nearest and dearest friends could afford.

He rode, hunted, fished, studied botany in the shade, wrestled again with the boys, and swam as of yore in the Genesee.

He assures us that, while it is very pleasant now in the old Empire State, his fond desires still turn toward the setting sun, beyond the Sierras, to the child of his adoption, the California Medical College. We shall have his sympathies and best wishes during his absence.

Medical Legislation.—The subject of medical legislation has been considerably agitated since the address of Dr. King, at the National, a great deal of warmth being shown by both its advocates and opponents. Able arguments both for and against the measure have been well put forward.

Possibly were medical legislation entirely done away with, it might be well enough for all concerned, but if we must have it in one section, let us have it generally, all schools being fairly represented. Then the trash of the section, protected by law, will not encumber those not so protected.

It is useless to affirm that medical legislation will not elevate the standard. Competition among medical colleges has become too strong for even a maintenance of the present status without the healthful influence of some disinterested, supervising body to see that diplomas are not granted on short time. In many medical colleges, "money makes the mare go," and students are squeezed through in order to fulfill promises made to secure them as matriculants in the start.

Disguise facts as we will by assumed virtue, no college will be more than true to its requirements, and many strain points sadly in doing this. Let there be a legalized body to know that the requirements upon such institutions are honestly fulfilled, and let students understand that a diploma obtained in any other than an honest and faithful manner, will fail to guarantee the right to practice medicine.

A Letter Answered.—The following communication from an Illinois reader contains some peculiar inquiries upon subjects about which we have never taken time to think deeply; but as the writer is apparently in earnest, we offer him the best solution in our power.

EDITOR CALIFORNIA MEDICAL JOURNAL—*My Dear Sir:* Excuse the liberty taken, as I seldom write for journals, and, in fact, do not feel qualified to enlighten others on questions medical; but write for information. If mistakes are made, please correct.

Will you please publish in your journal the symptoms or expressions that belong to the different temperaments? I see M. D.s differ very much on these points.

Another question which many may think of no importance and too trifling to take note of (but I think differently, as trifles make perfection, and perfection is no trifle),

is, Is whistling vocal or instrumental music, and why? I think it belongs to the medical profession to answer such questions, and I think this is a fair one. If unanswerable, let me know that.

What is the direct cause of gray hairs when not hereditary?

Another; we are subject to some diseases but once. What part of the system is changed, and how,—in typhoid fever, scarlet fever, measles, whooping cough, etc.? I ask for information only. If the above are answerable, please reply through the Journal, but if not, please do not make light of them. Truly yours,

T. M. D.

Authors differ in certain respects regarding the human temperaments; still, the general divisions made are pretty well adhered to, we believe. One reason that M. D.s differ on the subject is that many write and talk knowingly upon it who really know nothing about it. Possibly it is a failure with some M. D.s, not upon this subject alone, but on many others.

Four general divisions are made of the temperaments, viz.: the *sanguine*, the *bilious*, the *lymphatic* and the *nervous*. The sanguine temperament is marked by moderate plumpness of person and firmness of flesh; the hair is light, but not fine and silky as in the lymphatic; the eyes are light, the complexion fair, the skin soft and thin, the circulation active, the pulse full and frequent, the countenance animated, the movements quick, the passions excitable, the mind volatile. The bilious temperament is marked by firmness of flesh, strongly marked features, harsh outlines of person; the hair and eyes are dark brown or black, and the complexion swarthy. The superficial veins are large, and the pulse is full, firm, and of moderate frequency. There is much energy of character, with great power of endurance, both physical and mental, and permanence of impressions. To this class Powell adds red-haired persons of similar outline. The lymphatic temperament is the watery class of people—those of full, flabby tissues—portly people, though obesity or superabundance of fat should not be confounded

with lymph. In this class the hair is light of color and fine in texture; the eyes light blue, gray, or hazel; the skin pale, the lips large, and the face lacking in expression. The circulation is languid, the pulse slow, and all the functions, bodily and mental, are torpid. The nervous or encephalic temperament is distinguished by small, spare form, with soft and slender muscles. The features are delicate, the hair fair, and the complexion pale or slightly tinged with red, the lips thin, and the eyes bright and sparkling. The pulse is small, frequent and quick, and easily excited by emotion. The senses are acute, the thoughts and movements rapid, and the imagination lively. Examples of these temperaments are not common in their purity, combinations of two or more of them being the rule.

Whistling can hardly be considered vocal music, as the word vocal is derived from the Latin word *vox*, voice. Therefore, if we grant it the dignity of a musical sound, it must be something else besides vocal music, and as the lips and other organs concerned in the production of the sounds may very properly be considered instruments, we would say, from what light we possess, that whistling, if music at all, is instrumental music.

The hair follicle supplies the pigment which gives the hair its color. The cause of gray hair is failure upon the part of this follicle to supply the coloring matter in proper amount—a kind of pigmentary degeneration.

In reply to the last question we would remark that typhoid fever is not a disease that protects the system from a second attack. Scarlet fever, measles and whooping cough usually afford immunity, but how this is we are at a loss to explain. Koch has asserted the contagium in these cases to consist of micro-organisms, but upon what part they act, or how they so impress the system as to enable it to resist subsequent attacks, it still remains for some investigator to find out. We give it up.

The Maine Unpleasantness Again.—In commenting on the Maine Medical College trouble, last month, we observed that we knew of nothing derogatory to the credit of that institution, forgetting a communication which appeared in the *Eastern Medical Journal*, last May, from B. H. Burrell, M. D., setting forth the reasons why he resigned as teacher there.

Dr. Burrell has written us since, calling attention to the article and requesting us to republish it. Having also a communication in hand from Alexander Wilder, M. D., secretary of the National, on the same subject, we will endeavor to state succinctly the gist of the article mentioned, and publish the letters of Drs. Wilder and Burrell. We do not desire to champion an unworthy cause, and possibly have been a little careless in omitting to notice what Dr. Buzzell sets forth, before. We have no sympathy with the issuing of diplomas to unworthy and incompetent men, who have not even endeavored by honest application to merit them. Eclecticism has already too many sins of that kind to answer for. Let us be honest with ourselves.

The article of Dr. Burrell, states that a student of the college presented himself for graduation, and failed to pass successfully in four out of the seven chairs, and that two of the faculty, himself and another member, refused to sign the diploma; but the student being at the time a member of the Board of Trustees, exerted personal influence enough by voting with the other members, to declare in favor of his own graduation, and this student was afterward elected treasurer of the Board of Trustees. Dr. Burrell then tendered his resignation which he states was ignored, but upon publishing a letter in the local paper at Lewiston, exposing the transaction, he was finally expelled from the faculty.

We do not desire to have a finger in the pie of the Maine Medical College or any other, except our own, but these affairs concern us all and it is proper that they be ventilated.

We know it is not customary among the "regular" brethren to sit down on any one of their institutions, however much "deviltry" they may be guilty of; but we are not regular, you see.

Having then submitted space to the communication of Dr. Buzzell, last month we will now lend attention to the replies of Drs. Wilder and Burrell, though they will crowd out several pages of interesting selected material we had intended for our readers.

NEWARK, N. J., Sept. 6, 1884.

TO THE EDITOR OF THE CALIFORNIA MEDICAL JOURNAL: I saw in your last number a complaint from Dr. Buzzell of the Maine Eclectic Medical College, that the National Association, at the recent annual meeting, had condemned that institution. He also referred to the secretary as participating in the matter.

I write you about this matter, because yours is the only journal where any such complaint seems to be made. Dr. Buzzell's grounds for complaint appear to me to be small. The facts are that the Eclectic Society of Maine, at the late annual meeting, passed resolutions censuring the management of the college at Lewiston, and ordered copies to be served on the secretary of the National Association and others. Certainly this brought the matter within the province of the association. In hastily sketching the proceedings for the convenience of our medical journals, I referred to it as an ill matter. Any fault found with an institution for which eclectics are held accountable, may be justly so characterized. This Maine College has existed some six years, and all that time had failed or omitted to have any communication with the National Association. Yet those who desire to malign us, select just such examples to illustrate their scandal. The officers of the college had a reasonable opportunity to rebut the action of the State Society if it had done wrong.

Perhaps I ought to state that the matter, though in the secretary's hands, was not referred to the Committee on Colleges. It was overlooked in the confusion; the committee taking no papers from the desk. It seems to be a notion of many of our members that if there is a committee on any topic, it is empowered to take papers, etc., from the

hands of unofficial individuals and act upon them. Yet the parliamentary principle is imperative that no paper is in the custody of a meeting till it is received by the presiding officer and has been duly announced by him.

Neither Dr. Buzzell nor any other man has a right to impute one thing or another to the sentiments of the secretary. The fact is, a secretary has no opinions on any side of any question, but only such as relate to his official duties in the case. I have always acted thus impartially.

Personally, I do not share in the disposition to place impediments in the way of eclectic medical colleges. I would gladly have as many as can be sustained. I never said a word to a living man adverse to the Maine College, for I desired it to prosper, or, rather, that it should deserve to prosper.

In these days of proscriptive legislation, which I regard as a foul blotch on the civilization of the century and our pretensions of republican liberty, we need a college in every State to shield our unfortunate brethren from persecution. I do not expect to be satisfied till equivalent protection is afforded.

Nevertheless, I would inexorably close the doors of every institution where the instruction is superficial and the degrees are sold or virtually sold. If the Maine College, or any other, even the University Medical College of the city of New York, is liable to this criticism, and there is no hope of remedy, I would gladly close it. I have, however, no prejudice or ill-feeling in the matter. I wish it to do right and to prosper.

The United States Medical College, in its day, did endeavor to maintain a superior curriculum. Its examinations required more than 1,600 correct written answers to questions; and the course was graded like the Harvard Medical School. Yet, curiously enough, it was acceded no favor by Medical Boards or Old-School adversaries; but was persecuted with a special spite. It was impossible to obtain a candid hearing. Finally, it has been closed by a quibble of the law, and I hear professed editors rejoicing over it.

It is unnecessary for me to say that I do not sympathize at all with the fashionable pleading in favor of statutes to regulate the practice of medicine. My ground is fully and explicitly put forth in the preamble and constitution of the National Association. I understand the object of the

statutes lately enacted to be the total extirpation of all practitioners not called regular. The modern statutes read much like the former ones, under which men were fined, imprisoned, and once or twice accused of murder. I understand the animus to be the same. It has been a curious fact that the less sympathy a professed eclectic had with his eclectic brethren, and the greater his *penchant* for mercurials, the more zealous he is for arbitrary statutes.

The early history of the eclectic practice was characterized by union to secure the repeal of such measures. "If," says the apostle Paul, "I build again the things which I destroyed, I make myself a transgressor."

I was surprised at the curious reasons of your contributor "C." that the purpose of a higher standard of medical education was to keep down the number of physicians. I had supposed it to be to make better ones. I am aware that the craze for legislation was got up by Old-School Doctors without patients, for the purpose of driving eclectics and others out of the calling, in order to secure a monopoly and class privileges for themselves. It may be well for eclectics, where such legislation is had, to secure representation for themselves, as a means of mitigating an evil and protecting their own brethren. But to pretend to any intelligent man that the action of Medical Boards tends to improve practice and raise the standard of qualifications is to assume such a man to be very credulous.

The Medical Boards are virtually an Old-School device. Their standard is substantially this—that the most ignorant, illiterate individual who holds an Old-School diploma, and the most miserable diploma-ship that is "regular," is high as heaven above the most scholarly eclectic, or the highest-toned Eclectic College. To this complexion we come, however much any may seek to beat round the bush with sophistry. Yours truly, ALEXANDER WILDER.

TO THE EDITOR OF "CALIFORNIA MEDICAL JOURNAL"—
Dear Sir: I notice in your journal of September an article headed "The Maine Eclectic Medical College." It seems strange in face of the proceedings in the graduation of the student mentioned in the article in the *Eastern Journal* that Dr. Buzzell should still assert that the "College" is all right. I would ask you that, for the information of yourself and readers, you would publish entire the article

entitled "Why I Resigned." When we consider that Dr. York (the mentioned student) failed to pass in four out of seven regular chairs, we cannot understand Dr. Buzzell's statements in regard to the same. The qualifications of this student at the examinations may be inferred from his answer to the question as to the location of the cæcum, by saying it was "at the beginning of the rectum." When we think of answers in the four chairs rejecting him of a like character, we can understand a reason for refusing him a diploma, if Dr. Buzzell cannot. After my article in *Lewiston Journal* denouncing the granting him a diploma, still under date of March 18, 1884, I find Dr. Buzzell writing me, offering me an increase of salary if I will remain; praising my work in the college and endeavoring to smooth over the York matter by saying that "if we are all quiet and still, the furor will soon be over." If an honest graduation, why keep still? Because every one inside and outside the college know well the students' inability to pass an examination. Even he, himself (the student), stated at the examination his inability to graduate, and asked to be excused; and Dr. Buzzell whispered, "It is a perfect godsend." When Dr. Buzzell stated to me that morning that he had been to York's house, but had been afraid, he confessed, to ask him not to try to pass—what did that mean? Both the resigning professors have been asked to return, and both of them refused. I can show my letter of date of March 18, 1884. But this student was also a trustee—and he must go through. A special meeting of trustees was called, Dr. York making up the quorum required, and when the question was put whether he should pass, he (the student), voted "Yes" to that question—that was regular was it not? So too, Dr. York's statement that he had paid all the expenses of the special meeting, and the personal traveling expenses of the president and Dr. Buzzell to and from Portland, to attend the meeting. How injured innocence dies out with Dr. Buzzell! And how kind of them to make the student *treasurer* of the Board. But why ashamed afterwards, in the published list of officers elected, to mention such an officer as *treasurer* and also to mention the *officer's name*? Why all this secrecy? Dr. York got his diploma, and that is enough. But when I am asked about it, I give the facts as stated in the *Eastern Medical Journal* article. Other curious facts can be stated for Dr. Buzzell's benefit if he

wishes, but all who know the story are well satisfied to let the college, under its present management, severely alone. I should not have answered above, if Dr. Buzzell's memory of above facts had not seemed to be defective—it is well to remember sometimes and sometimes it isn't. If we were Dr. Buzzell, we should take his own advice mentioned in his letter to me—viz., “if we are all quiet and still, the furor will soon be over.” *We should keep quiet and still and wait until clear weather was seen.* Very respectfully,

Boston, Mass.

B. H. BURRELL, M. D.

Since the above went into print, we have received a letter from Prof. Buzzell, in reply to an editorial in the *Eastern Medical Journal*, which we reprint below, that what follows may be understood. We are several miles away from the “land o’ stiddy habits,” and thank our lucky stars, for just now the air is dark in that quarter, with flying missiles. We earnestly abjure our friends to bury the hatchet, effect a reconciliation, and institute a love feast.

And now, seriously, we hope we shall hear no more on this subject. The only person aggrieved who has not had a hearing, is Dr. Marston of the *Eastern Medical Journal*, and he has abundant opportunity to reply through his own pages. Therefore we dismiss the disputants with our blessing, hoping their next communications may be on some agreeable subject. If the Maine Medical College has been guilty in the past, let it redeem itself by good works in the future; if it has been maligned, an upright course cannot fail to bring justification.

The *California Medical Journal* says: “We know nothing derogatory to the credit of the Eclectic Medical College of Maine.” This after it has been fully shown up by a State society and several medical journals. To further try to convince the worthy editor of the crookedness of the institution named, we will here state that, at its last session, diplomas were illegally granted to at least two (and we believe three) individuals—because of non-attendance, gross incompetency, and immoral character. Prof. Buzzell's idea of what constitutes a “full attendance” is decidedly different

from some, viz.: when the writer was connected with the concern, the "dean," at a meeting of the faculty, informed us that he thought a certificate of attendance ought to be granted *when the student pays his tuition*; then he could attend or not, as he chose! But we must take into consideration that the Professor "exercises freedom and liberality," and is "independent of all sects, parties, or medical creeds."

He further states that the Lewiston College will run, yes, and his prospectus for the coming year tells *how* it will run, as the "faculty" consists chiefly of graduates of the college at its last session, and men known in their vicinity as not worthy of a position in any reputable medical college. Yes, it may "run"—down.—*Editorial in Eastern Medical Journal.*

MR. EDITOR: My attention having been called to a base, mean, contemptible, and, I may add, *characteristic*, article contained in what is called the *Eastern Medical Journal*, as editorial, in which there are several false, libelous statements concerning myself and the college with which I am connected, said article having been provoked by a friendly remark made in your Journal in favor of our college, and this being only one of a series of low and scurrilous articles contained in said Eastern journal, since we were compelled to discharge its editor, A. J. Marston, from our board of teachers, as unworthy the confidence of the trustees of the faculty or a respectable community, having been guilty of falsehood, misrepresentation, unprofessional conduct; for an indictment and fine as a common rum-seller; for advertising and putting out a sign for a hospital for the accommodation of the public, his only outfit being two small office rooms and a cooking stove, which only excited the mirth and derision of our enemies at Lewiston and community, we being then, after all this baseness on his part and disappointment upon ours, disposed to let the fellow go, without public notice, if he would be quiet and behave himself in the future. But as he seems disposed to defame both the college and its teachers, I deem it duty to myself, he having used my name in his article, and the public generally, to state that said A. J. Marston was not only discharged from our college with discredit, but was arraigned before the State Eclectic Medical Society last winter, although he did not put in an appearance, but employed a member to act as his attorney. S. E. Root,

M. D., and B. H. Burrell, M. D., prepared the charges against said Marston, embracing all that was brought against him by the faculty, and more. After due investigation, he having failed to appear at the previous meeting, he was expelled from the society, and, at the annual meeting of said State Society, he, said Marston, having requested, through one of its members, a rehearing of his case, was refused this, and is consequently expelled from the Eclectic Society of this State.

In reply to said Marston's statement about the graduation of two students at our last term that were not qualified, I have only to say that it is simply false. What he states was said at a meeting of the faculty by the Dean (myself), viz., "that he thought a certificate of attendance ought to be granted when the student pays his tuition; then he could attend or not as he chose." No such statement was ever made by me or thought of. I was in favor of issuing tickets by each member of the faculty, as is customary at many medical colleges. Nothing was ever said about certificates of time to be given at the commencement of a course, as my colleagues will bear me witness.

This sagacious editor objects to the appointment of graduates as teachers. I would inquire if our graduates have been thoroughly taught, and especially if they have shown themselves apt students, who are better prepared to teach most of the branches of the profession than students fresh from the lecture room? This precocious medical youth sneers at our prediction that our college will continue to "run," and thinks it will run down. One thing is certain, it will never run by *rum*.

At the same society meeting when Marston was refused a hearing, several resolutions were passed, by six members in an evening session, when all the friends of the college were absent, and hurried into the papers that night, and before the next day session, when they were to be discussed. Most of the best members of the society are greatly incensed, and will reverse the whole matter at its next session.

J. M. BUZZELL, M. D.,

Dean of Eclectic Medical College of Maine.

NOTES.

SIR ERASMUS WILSON, a noted authority on skin diseases, died in London, Aug. 8th, aged seventy-five years.

GELSEMINUM is recommended in fractional drop doses of the fluid extract for the relief of after-pains.

THE *Eclectic Medical Journal* has a new contributor. His name is Jason Hapgood, M. D. The editor of the *American* calls him "the Veiled Prophet."

DR. W. F. KIER, 309 South Fifth Street, St. Louis, says: "I have used IODIA as a uterine tonic and alterative. I prescribe it with *the very best results*. I regard it as one of the *very few* HONEST preparations."

DR. HINTON writes in the *Therapeutic Gazette* of a case of spermatorrhœa which resisted his efforts for a long time with ordinary means, cured with five-drop doses of fl. ext. aletris farinosa in a few days.

PEPSIN and pancreatin are said to have been employed with success in the treatment of gout. The theory which led to their use was based upon the belief that the disease is the result of faulty digestion. In some cases recovery ensued after a number of months.

Crotalus hor., cured Cerebro Spinal Meningitis. The symptoms guiding to its selection were the red tongue, great thirst, nausea, epistaxis, very offensive, black, bloody stool, dilated pupils, and general appearance and condition of patient.—*Dr. Donald.*

OUR old school friends occasionally unearth an old eclectic use for an indigenous remedy with as much delight as though it were born to-day. Dr. Holt in the *Medical Record* has recently discovered that hammamelis applies in menorrhagia and dysmenorrhœa. Bright boy; go to the head.

AN exchange notes that a California girl who lost an arm in a railroad accident and afterward shot herself in the leg, the injury resulting in amputation, has recently lost three of the fingers of the remaining hand in a hay cutter. The writer naughtily remarks, If she continues to thus prune herself, there will soon not be enough left to marry.

A WRITER in the London *Lancet* reports a number of cases of goître cured by the internal administration of flouric acid. A decided cure resulted in eighty-five per cent. of the cases treated, and all were benefited, even where other treatment had failed. The second decimal dilution was employed.

DR. WILLIAM ANDERSON in the *Lancet* reports the accidental discovery of the fact that santonine cures obstinate gleet. A patient applied to him for a remedy for lumbrici and received the remedy for the removal of the parasites. Meeting the patient shortly afterward he informed him that a long-standing and obstinate gleet had disappeared since taking the medicine. Five grains were administered at a dose. Less would probably do as well.

Mitchella is useful when the urine is scanty and sediment profuse; urine is dark colored but sediment thrown down is whitish; neck of bladder irritable and sometimes it and urethra œdematous, making urination urgent, tedious or impossible; mucous membrane of bladder involved, causing dull pain and uneasiness, especially in women with uterine disorders. Dr. King recommends it in sore nipples, the fluid extract being mixed with vaseline.—*Dr. Winterburn.*

BEEF-TEA made red-hot with red pepper is the very best treatment for delirium tremens. A patient to whom I once administered such a dose, made so strong that I would not have dared to taste it myself, afterwards told me that it was the most refreshing and *cooling* drink he had ever taken. A London surgeon to the police told me that he had treated a hundred and fifty cases of delirium tremens with this remedy *alone*, and had not lost one.

FROM numerous inquiries being made by medical students, we anticipate a large class at the college the coming winter. Medical students who desire instruction in an eclectic institution should investigate the merits of ours before deciding to go elsewhere. We have the finest anatomist in America in Professor Gere, and a teacher in ophthalmology and otology not excelled anywhere. In fact, we aim to teach thoroughly in every department. Our students all believe we teach too much for them to grasp it thoroughly, but our three-years-course students always express themselves well satisfied at the time of graduation.

DR. DOANE in a communication in the *Medical Brief*, asserts that inflammatory diseases of the eye have largely increased in New York City since the construction of the elevated railroads. It seems that the friction of the roadbed detaches small particles of iron, which are wafted by the currents of air into the eyes of the pedestrians beneath. Oculists find in many cases of this nature that a magnet applied to the eye attracts small particles of material, which analysis shows to be iron monoxide.

THE following is Dr. Fothergill's formula for asthma:—

R. Tinct. Lobeliæ.....5 ounces.
 Ammon. Iod.....2 drachms.
 Ammon. Brom.....3 drachms.
 Syr. Totultani.....3 ounces.

M. Sig.: Teaspoonful every one, two, three, or four hours.

This gives relief in a few minutes, and sometimes the relief is permanent.

A WRITER in the *British Medical Journal*, Dr. Dolan, calls attention to the value of sulphide of calcium in the treatment of scabies. He regards it as highly superior to sulphur ointment in effect, besides being much less objectional on account of its superior cleanliness. The formula recommended for its preparation is as follows: "Flowers of sulphur 100 parts, quicklime 200 parts, and water 1,000 parts. Boil the whole for some time, stirring occasionally until the substances become incorporated; allow the liquid to cool and decant into hermetically sealed bottles. It should not be made in a metal vessel; and as in the process of making the smell is not agreeable, care should be taken in this respect." To apply, the patient is first put into a warm bath, after which he is to be painted with a brush dipped in the preparation, and placed in bed in flannel blankets or in a flannel nightgown. Usually the one application suffices unless the case is long standing and the crusts thick, when it may need repeating.

BOOK NOTICES.

A MANUAL OF DISEASES OF THE THROAT AND NOSE including the Pharynx, Larynx, Trachea, Oesophagus, Nose and Nasopharynx, by Morrill Mackenzie, M. D. Vol. II.

The August number of Wood's Library. A marvel of cheapness.

THE FORMATION OF POISONS BY MICRO-ORGANISMS. A biological study of the Germ Theory of Disease, by G. V. Black, M. D., D. D. S. Published by Blakinston Son & Co., Philadelphia, Pa. Price, \$1.50.

Considering the importance at present attached to this subject, this little volume comes to hand very opportunely. It affords in condensed form a very clear idea of the subject under consideration, enabling the reader to grasp what the numerous journal articles upon the subject rather tend to obscure. The work is divided into three parts. First, the steps through which the subject has been evolved are set forth, then the relation of micro-organisms to the production of disease follows, and, finally, the author being interested in dentistry, an appendix is devoted to the relation of dental caries to the germ theory of disease. A very readable and desirable work.

INOCULATION OF RABIES.

"PASTEUR, in an able address before the International Medical Congress, embodied the following brief summary of the results of the Commission appointed to investigate the subject of preventive inoculation for rabies, appointed at his request by the French Government. He presented to the Commission nineteen vaccinated dogs, all of which had been rendered insusceptible by preventive inoculation, and thirteen of which after vaccination had been proved by inoculation by trephining. These nineteen dogs were compared in different ways with nineteen dogs chosen from others for the purpose of the experiments. In the first place, on the 1st of June, two of the protected dogs and two of the trial dogs were inoculated by trephining under the dura mater with the bulb from a mad street-dog. On the 3d of June one protected dog and one trial dog were bitten by a mad street-dog. On the 4th of June the Commission made the same mad dog bite another protected and another trial dog. On the 6th of June the mad dog which had been used on the 3d and 4th of June died, and with its bulb three protected dogs and three trial dogs were inoculated by trephining. On the 10th of June the Commission had one protected dog and one trial dog bitten by a fresh mad dog from the streets. On the 16th of June the Commission had two fresh dogs, one protected and one trial dog, bitten by one of the trial dogs of the 1st of June, which

had gone mad on the 14th, as a result of the trephining performed on the 1st of June. On the 19th of June the Commission had three protected and three trial dogs inoculated in one of the popliteal veins with the bulb of a mad street-dog. On the 20th of June the Commission also had ten dogs—viz., six protected and four trial dogs, chosen from several others—inoculated in a vein. On the 28th of June, it having been brought to the knowledge of the Commission that a veterinary surgeon, M. Paul Simon, had a mad dog in his hospital, four dogs were brought to it, viz., two protected and two trial dogs, in order that it might bite them.

The Commission on rabies has thus performed experiments on thirty-eight dogs, nineteen of which had been supplied by me as insusceptible to rabies, while the other nineteen could be made mad. Those of the dogs which have not died as a result of the experiments, are under observation, and will be kept under it for a long time. As to the present condition of the dogs which have been the subject of inquiry, the Commission report that in the case of the nineteen trial dogs, of six which were bitten rabies occurred in three, of seven which were inoculated in a vein it occurred in five, and of five which were inoculated by trephining it occurred in all, while *not a single sign of rabies has shown itself in any of the nineteen vaccinated dogs.*

During the course of the inquiry one of the protected dogs died on the 13th of July, from a sanguineous diarrhoea, which first declared itself in the early days of that month. In order to determine whether rabies had any share in its death, three rabbits and one guinea-pig were at once inoculated with its bulb by trephining. All of these four animals are still in the best of health, which is a certain proof that the dog did not die of rabies, but of a common disease.

The next report of the Commission will contain information as to the insusceptibility to rabies of twenty dogs which have been vaccinated by the Commission itself.—*Medical Times and Gazette.*